

PICC Nurse Skills Packet			
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Name:		Employee ID#:	
Unit:		Title:	
Due Date:	New hire: prior to end of unit orientation period: ____/____/____.		
	Current Staff:		
These skills will be considered complete when all below performance criteria are completed and pages 1, and 2 have been scanned and emailed to: hs-cppn@ucdavis.edu			
Skill/Learning Not all skills are applicable to all Nursing areas – if not applicable mark as N/A	Skill Code (For CPPN Use Only)	Date Completed (or N/A)	Verifier Initials
Adult Respiratory Assessment Skills Checklist	DAHS-NSCARA14		
Basic Dysrhythmia Detection and Treatment Skills Checklist	DAHS-NSCBDDT15		
Blood Draws Skills Check: Performs per UC Davis Health Policies 13001 Vascular Access Policy (Adult/Pediatric) , 13002 Vascular Access Policy (Neonatal) , and 13029 Venipuncture Verification and Blood Withdrawal	DAHS-NSCBD14		
Initial PICC RN Placement Skills Checklist	DAHS-NSCIPICCRNP14		
Lidocaine Skin Anesthetic Injection by a Certified RN: use one or both of these forms: Lidocaine Skin Anesthetic Intra dermal Injection and/or Lidocaine Skin Anesthetic Needle Free Injection			
Microintroducer Modified Seldinger Technique for PICC Insertion Skills Checklist	DAHS-NSCMMSTPI14		
PICC Placement Using Ultrasound Guided Insertion Skills Checklist	DAHS-NSCPICCPUUGI14		
Respiratory Emergencies and Equipment Skills Checklist	DAHS-NSCREE14		

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SIGNATURE PAGE:

Signature and Printed Name of Verifier (preceptor or other verified personnel) who have initialed on this form:

Initial:	Print Name:	Signature:

PRECEPTEE STATEMENT AND SIGNATURE:

I have read and understand the appropriate UC Davis Health Policies and/or equipment operations manual, I have demonstrated the ability to perform the verified skills as noted, and I have the knowledge of the resources available to answer questions.

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Adult Respiratory Assessment Skills Checklist #DAHS-NSCARA14		
References:		
Note type of oxygen delivery system, method of airway management and/or mode of ventilation.		
Make general observation of patient's overall status.		
Observe for rate, depth, pattern, symmetry, and effort of respirations. Observe for use of accessory muscles.		
Observe for color and pallor of skin and mucous membranes.		
Observe for color, quantity, odor and consistency of secretions.		
Observe position of trachea.		
Auscultate in an orderly manner all lung fields and describe lung sounds appropriately.		
Palpate neck, chest, and shoulders to assess for the presence of subcutaneous air.		
Monitor and document oxygen saturations and End Tidal CO2 levels when appropriate.		
Describe/demonstrate method for contacting respiratory therapy.		
Have available in the patient's room, and know how to use, necessary respiratory equipment.		
Locate/describe emergency respiratory equipment.		
Document all pertinent information in the appropriate locations.		

Basic Dysrhythmia Detection and Treatment Skills Checklist #DAHS-NSCBDDT15		
References:		
1. Cardiovascular Nursing Practice, Jacobson, C. et. al., CNEA, 2007.		
2. Elsevier Skills for review:		
• Cardiac Monitor Setup and Lead Placement		
3. Elsevier Nursing Consult - Clinical Updates CE: Differentiating Dysrhythmias Part 1: Recognizing and Treating Atrial Dysrhythmias		
Successful completion of CPPN ECG Interpretation Course OR ECG Challenge Exam #DAHS-NGNECGICE20 may be used in place of this skill checklist.		
Describe the electrical conduction system of the heart.		
Explain the waves and intervals of the normal ECG and their significance.		
Identify sinus dysrhythmia and discuss the causes/treatments.		
Identify atrial dysrhythmia and discuss the causes/treatments.		
Identify junctional dysrhythmia and discuss the causes/treatments.		

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<i>Basic Dysrhythmia Detection and Treatment Skills Checklist #DAHS-NSCBDDT15 (Continued)</i>		
Identify supraventricular dysrhythmias and discuss the causes/treatments.		
Identify ventricular dysrhythmias and discuss the causes/treatment.		
Identify Torsade de pointes and discuss the causes/treatments.		
Identify life-threatening dysrhythmias and discuss the causes/treatments.		
Identify heart blocks and discuss the causes/treatments.		
State documentation to be included.		
Initial PICC RN Placement Skills Checklist #DAHS-NSCIPICCRNP14		
References:		
1. Journal of Infusion Nursing: Infusion Nursing Standards of Practice, 2006.		
2. The Infusion Nursing Society, Infusion Therapy in Clinical Practice, 3rd edition, 2010.		
Read UC Davis Health Clinical Policy 13013: Parenteral Nutrition		
Successfully complete UC Davis Health Care System IV Verification		

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Initial PICC RN Placement Skills Checklist #DAHS-NSCIPICCRNP14		
References:		
1. Journal of Infusion Nursing: Infusion Nursing Standards of Practice, 2006.		
2. The Infusion Nursing Society, Infusion Therapy in Clinical Practice, 3rd edition, 2010.		
Successfully complete <i>Initial Skill Testing: PICC Placement Using Ultrasound Guided Insertion.</i>		
Successfully complete <i>Initial Skill Testing: Micro Introducer Modified Seldinger Technique for PICC Insertion.</i>		
Read manufacturer's instructions and guidelines of product use (package insert) for: Sherlock navigation device, ultrasound device and PICCs and MST's used to place PICCs by the PICC Services Department.		
Appropriate patient information reviewed: a) Appropriate EMR order b) Patient diagnosis c) Lab result variance noted (high white blood count, platelets, INR/PTT) d) Relevant images or duplex studies (occluded veins, structural deformities) e) H & P and Progress notes (CKD pt., previous PICCs, mastectomy, cardiac anomaly, liver disease, recent pacemaker)		
Appropriately obtain and complete PICC consent documentation (to include risks, benefits, possible complications and alternatives.)		
Observe proper sterile technique: Completion of Sterile Field Skill.		
Complete a minimum of ten ultrasound guided PICC insertions.		
1. Location:		
2. Location:		
3. Location:		
4. Location:		
5. Location:		
6. Location:		
7. Location:		
8. Location:		
9. Location:		
10. Location:		

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	Date	Verifier Initials
Initial PICC RN Placement Skills Checklist #DAHS-NSCIPICCRNP14, continued		
Correctly document PICC insertion procedure in EMR, including pre-procedure checklist, Central Line Insertion Checklist, PICC Placement Note, and add PICC to IV Assessment flowsheet		
Complete excel database appropriately		
Microintroducer Modified Seldinger Technique for PICC Insertion Skills Checklist #DAHS-NSCMMSTPI14		
References:		
1. Journal of Infusion Nursing: Infusion Nursing Standards of Practice 2006		
2. The Infusion Nursing Society: Infusion Therapy in Clinical Practice, 3rd Edition 2010		
3. Journal of the Association for Vascular Access, Position Statement "Use of MST for PICC Placement by a Registered Nurse" AVA Website 2007, www.avainfo.org .		
Successfully complete PICC placement Skills/instructional strategies and performance criteria.		
Read manufacturer's instructions and guidelines of product use (package insert).		
Read Microintroducer Technique for PICC Placement /Journal of Infusion Nursing.		
Correctly demonstrate MST on the "Peter PICC" mannequin arm.		
Discuss possible complications of MST.		
Complete a minimum of ten successful PICC insertions using Microintroducer technique. Correctly document PICC insertion procedures.		
1. Location:		
2. Location:		
3. Location:		
4. Location:		
5. Location:		
6. Location:		
7. Location:		
8. Location:		
9. Location:		
10. Location:		

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PICC Placement Using Ultrasound Guided Insertion Skills Checklist #DAHS-NSCPICCPUUGI14		
References:		
1. Journal of Infusion Nursing: Standards of Practice, 2006.		
2. The Infusion Nursing Society: Infusion Therapy in Clinical Practice, 3rd Edition, 2010.		
3. Manufacturer's Instruction Manual.		
4. Position Statement, Use of Real-Time Imaging Modalities for Placement of CVA Devices, Association for Vascular Access, 2010, www.avainfo.org.		
Successfully complete PICC placement Skills/instructional strategies and performance criteria.		
Read ultrasound manufacturer's instructions and guidelines of product use.		
Using ultrasound visualization, successfully identify the following venous and arterial anatomy: basilica vein, brachial vein, cephalic vein, axillary vein, saphenous vein and brachial artery.		
Describe the appearance of venous anatomy that is appropriate for choosing a desired vein for PICC placement.		
Successfully measure vein with ultrasound measuring tool on U/S device. Identify vein size appropriate for PICC size.		
Identify / describe abnormal venous anatomy.		
Complete Initial Ultrasound Skill post-test.		
Observe ultrasound guided PICC insertion.		
Complete a minimum of ten successful ultrasound guided PICC insertions.		
1. Location:		
2. Location:		
3. Location:		
4. Location:		
5. Location:		
6. Location:		
7. Location:		
8. Location:		
9. Location:		
10. Location:		
For OUT-PATIENT placements only: Correctly save vein image to ultrasound device and download image to database.		
Correctly document the use of ultrasound for insertion in the PICC Placement Note.		

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Respiratory Emergencies and Equipment Skills Checklist #DAHS-NSCREE14		
References 1. UC Davis Health Policy 13035: Administration of Medications for Rapid Sequence Intubation in Adults. 2. UC Davis Health Policy 17020: Inhaled Pulmonary Drug Administration. (Excluding Pentamidine/Ribavirin/Surfactant) 3. UC Davis Health Policy 17024: Continuous Pulse Oximeter. 4. Textbook of Advanced Cardiac Life Support, 2006. 5. Wells and Murphy, Manual of Emergency Airway Management, 2004.		
Demonstrate ability to regulate oxygen flow via thumbscrew controller of O2 flow meter; identify types of patients likely in need of O2 administration.		
Describe use of and demonstrates proficiency in use of O2 equipment		
Demonstrate setup for endotracheal intubation including equipment and drugs commonly used and state indication for ET intubation. (See Policy 13035)		
Successfully demonstrate ET tube, tracheal and nasal/oral suctioning of airways using correct equipment and technique.		
Describe or demonstrate preparation of patient for a thoracentesis including obtaining necessary equipment; state indications for procedure and function.		
Document all respiratory treatments, medications, related procedures, assessments, interventions, and the effects of each. Re-assess patient's status PRN as indicated by the patient's condition. Obtain MD order for paralytics and sedatives in order to maintain control of patient, patient's airway, and patient's comfort.		
Demonstrate use of pulse oximetry for monitoring patient.		